NHS
Wiltshire
Clinical Commissioning Group

MINUTES OF WILTSHIRE AUDIT AND ASSURANCE COMMITTEE MEETING
HELD ON TUESDAY, 12 JULY 2016 AT 09:30
AT SOUTHGATE HOUSE, DEVIZES

Present:

Peter Lucas	PL	Chair, Lay Member
Mark Smithies	MS	Secondary Care Doctor
Dr Anna Collings	AC	GP Vice Chair, NEW
Christine Reid	CR	Vice Chair, Lay Member

In Attendance:

Steve Perkins	SP	Interim Chief Financial Officer
David Noyes	DN	Director of Planning, Performance and Corporate Services
Susannah Long	SL	Governance and Risk Manager
Duncan Laird	DL	Manager, External Audit, KPMG
Natalie Tarr	NT	Internal Audit, PwC
Bryannie Thurston	BT	Internal Audit, PwC
Paul Travers	PT	Local Security Management Specialist

Apologies:

Lynne Baber	LB	Internal Audit, PwC
Simon Truelove	STr	Interim Accountable Officer

Item Number	Item	Action
AAC/16/07/01	**Welcome and apologies for absence** Round table introductions were made and apologies were noted as above.	
AAC/16/07/02	**Declarations of Interest** Members were reminded of their obligation to declare any interest they may have on any issues arising at the meeting which might conflict with the business of Wiltshire CCG. No declarations were made.	
AAC/16/07/03	**Previous Minutes** The minutes of the previous meeting held on 17 May 2016 were approved.	
AAC/16/07/04	**Matters Arising** None.	
AAC/16/07/05	**Action Tracker** AAC/16/05/01 – DN confirmed that Jill Crook will not be required to attend AAC. **COMPLETE**	

	AAC/16/05/06 – DN confirmed that the additional paragraph was added to the Annual Report. **COMPLETE**	
	AAC/16/05/13 – The Quality & Clinical Governance meeting on 5 July has been postponed to 21 July. MS/CR will raise the CHC Internal Audit Report as an agenda item for the meeting. **OPEN**	
	AAC/16/05/13 – The committee agreed that a connected meeting for AAC and Finance & Performance to discuss CCG performance issues would still be desirable. **OPEN**	
	AAC/16/05/19 – External Audit Procurement is on the Governing Body agenda. **COMPLETE**	
	ITEMS FOR DECISION	
AAC/16/07/06	**Scheme of Delegation (SoD)** SP presented the updated SoD explaining that this has been a thorough review taking out items that should actually be present in individual's job descriptions. Other items have been moved to more appropriate parts of the document. PL accepted the document but asked what assurance there is that the SoD is correct. NT advised that Internal Audit would not normally review the SoD. SP commented that a companion document, Scheme of Reservation (SoR) is being drafted by DN and will be presented to the next AAC. The September Governing Body would then be asked to approve both documents and the CCG Constitution would be updated accordingly. **The Committee agreed the Scheme of Delegation.**	**DN**
AAC/16/07/07	**External Audit procurement – Auditor Panel arrangements** SP confirmed that the Governing Body meeting on 24 May 2016 approved a joint procurement process for external audit services (alongside BANES CCG, Swindon CCG and Gloucestershire CCG) to be overseen by an Auditor Panel. The Panel will be drawn from AAC members, with a minimum of three members, a chair who is independent and a non-executive member of the Governing Body and a majority of members who are independent and non-executive members of the Governing Body. For the CCG, it is proposed that the chair is PL and members are CR and MS. AC, as a GP, may not be a voting member but could attend in an advisory capacity. The Committee discussed whether quoracy should be 2 members or the full Panel. As all recommendations are taken to the Governing Body for approval, it was agreed that this quoracy is suitable. **The Committee agreed the Audit Panel arrangements.**	

AAC/16/07/08	**Policy for the Management of Policies and SOPs** DN presented the policy which has reached its review period. SL advised that it is largely the same but some strict requirements have been relaxed to facilitate and reflect practice within the CCG. CR asked why it was no longer required for all EIA to be published on the internet. SL confirmed that EIA for key policies such as clinical policies around commissioning decisions will continue to be published but, for documents such as this policy, the EIA would no longer need to be published. **The Committee approved the policy.**	
AAC/16/07/09	**CCG legacy policy review** DN explained that staff who had transferred into the CCG from the PCT in April 2013 brought with them PCT policies as part of their terms and conditions of employment. The CCG and Human Resources have considered those legacy HR policies that remain and have made recommendations for the consolidation of the policies into new or existing CCG policies. The Staff Partnership Forum will be fully consulted on the development of policies and updated/new HR policies will be brought to AAC for approval. SP advised that some elements of A10 – Preceptorship Policy are still valid. **The Committee welcomed this workstream and agreed to delegate authority to DN to conduct the review of the legacy HR policies.**	
AAC/16/07/10	**Information Security Policy** DN withdrew this paper for further consideration by the Information Governance Group.	
AAC/16/07/11	**Information Governance Group (IGG) terms of reference** DN explained that IGG has been managing the IG agenda successfully within the CCG for some time. The ToR have been reviewed as part of an annual cycle. CR asked for clarification around reporting arrangements. Although AAC, as parent committee, receives the minutes on a regular basis and with effect from September will also receive a 6 monthly report, SIRO and Caldicott Guardian may at any time present a report to AAC or to the Governing Body. The sentence within 3.1 on reporting will be moved to 3.4. It was noted that DN currently holds the role of SIRO and the role of Lead Director for Information Governance. DN advised that this is an interim arrangement during recruitment for Accountable Officer and Chief Finance Officer posts is underway. **The Committee approved the updated terms of reference with the above amendment.**	

	ITEMS FOR DISCUSSION	
AAC/16/07/12	**Internal Audit progress report** NT presented the report noting that terms of reference have been agreed for three audits and meetings are being arranged for 'Clinical Leadership'. The audit for 'Community Contracts' has been rescheduled for Q3 to give time for contract performance to be monitored. NT confirmed that a range of stakeholders, as confirmed with Sarah MacLennan, will be involved in the 'Stakeholder Engagement' audit. It may be advisable to move the 'Corporate Governance' audit from Q2 to Q3/4 given the new month 9 Annual Governance Statement timetable and the requirement to audit the implementation of the new NHS England Conflict of Interests guidance. The Committee considered whether 4 days will be enough time for the 'Better Care Fund follow up' audit. SP advised that there is now a robust s.75 agreement and paying performance is no longer an issue. The CCG retains the option to do more and NT confirmed the relationship with the auditors of Wiltshire Council. **The Committee received and accepted the report.**	
AAC/16/07/13	**Internal Audit recommendation tracker** The report identified that all actions from the high risk reports, namely Communications, HR and QIPP have now been closed and validated. An update was not received for Medicines Management but SP was able to confirm that all actions are complete. DN commented that the on-site validation of implementation evidence by Internal Audit has been beneficial and would like to see this continue. AAC agreed that the tracker should continue to be presented at each meeting and that NHS England is aware of the document. **The Committee received and accepted the report.**	
AAC/16/07/14	**External Audit annual audit letter** DL presented the document advising that the external auditors are formally required to report their activities and findings, providing a summary for 2015/16. **The Committee received and noted the report.**	
AAC/16/07/15	**External Audit technical update** The technical update includes recent policy announcements from NHS England and the Department of Health. PL noted that the document highlights the sector deficit for 2015/16. It is commendable that Wiltshire CCG managed to meet its financial targets. **The Committee received and discussed the report.**	

AAC/16/07/16	**Security Management Service Progress Report** PT advised that the provision of security management has now moved to TIAA where there is a slightly larger team. PT advised that there is a minor security issue regarding swipe access to the first floor that he is investigating. PT will shortly be undertaking a site security review but is hoping to arrange this as a joint review with NHS Property Services and the CSU. **The Committee noted the update.**	
AAC/16/07/17	**Register of gifts, hospitality and sponsorship** DN presented the full register for 2015/16. Sponsorship by pharmaceutical companies of the GP Forum / Locality meeting is the most frequent item totaling £4,196. DN advised that new Conflicts of Interest guidance was issued by NHS England in June 2016 and this will inform the recording and reporting of gifts, hospitality and sponsorship. A briefing on this guidance and an updated Standards of Business Conduct Policy will be brought to AAC in September. **The Committee received and noted the report.**	**DN**
AAC/16/07/18	**Review Board Assurance Framework (BAF) and Risk Register (RR)** DN presented the BAF which has been reviewed for this financial year and the high level risk register. It was noted that QIPP is rated as green on the BAF but is the third highest risk on the risk register. The BAF looks at the controls and the assurances of those controls which are rated as green. This was evidenced by the early identification of the QIPP shortfall during 2015/16 giving the opportunity to bring in a Financial Recovery Plan. The risk register is a moving document with risks being managed down by the CCG. Risks to the urgent care system have been brought on reflecting the current situation. C – 14/038: DN commented that the Wiltshire Workforce Action Group is working well and has produced the training passport which supports staff movement across Wiltshire. It should be remembered that the risk score is the assessment of the Lead Director and is subjective. The rank is more important as this is the collective decision of the executive team which is then supported by AAC. A – 14/026: AC highlighted that mobilization of the MSK contract is one of the key areas of concern. The committee advised that this might be an issue to raise at the Governing Body. **The Committee agreed the BAF and the 'Top 10' risks to present to the Governing Body.**	

AAC/16/07/19	**Information Governance Report** This item has been postponed to the September AAC.	
AAC/16/07/20	**AAC self-assessment 2015/16** PL presented the self-assessment undertaken in May 2016. The assessment will be scheduled for May in future years. **The Committee received and noted the assessment.**	
	ITEMS FOR NOTING	
AAC/16/07/21	**Information Governance Group meeting minutes 12 May 2016 and 16 June 2016.** DN key issues currently being managed by the IGG are the IG Toolkit, IG in primary care, the Fileshare project and IG breaches. **The Committee received and noted the minutes.**	
AAC/16/07/22	**Aged Receivable and Payables Report** The Finance Team and the Director of Quality are pushing for resolution on the Swindon Borough Council receivable which is in regard to payments made by the CCG to a provider for continuing care where the patient is the responsibility of Swindon. SP went through the outstanding payables in detail. **The Committee received and noted the report.**	
AAC/16/07/23	**Losses and Special Payments Report – None**	
AAC/16/07/24	**Competitive Tender Waives – None**	
AAC/16/07/25	**Any Other Business** 1. The Q4 assurance letter has been received and noted and discussed in the AAC pre-meeting. The Q1 assurance meeting will be taking place this Thursday, 14 July 2016.	

Date of next Audit and Assurance Committee Meeting: 13 September 2016 09:30 – 11:30hrs